

Patent fees are subject to annual revision.

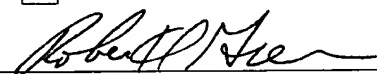
☐ Applicant claims small entity status. See 37 CFR 1.27

Attorney Docket No.	AAO-256
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Date	May 14, 2003
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3743

AMENDMENT TRANSMITTAL LETTER			Docket No. AAO-256		
Application No. 09/884,138-Conf. #2473	Filing Date June 20, 2001	Examiner N. Patel	Art Unit 3743		
Applicant(s): Mitsuru Uchiyama, et al					
Invention: APPARATUS FOR SUPPLYING A THERAPEUTIC OXYGEN GAS			RECEIVED		
TO THE COMMISSIONER FOR PATENTS			MAY 19 2003		
Transmitted herewith is an amendment in the above-identified application.			TECHNOLOGY CENTER R3700		
The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
Total Claims	5	- 20 =		x	0.00
Independent Claims	1	- 3 =		x	0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					
Other fee (please specify): Extension for response within first month					110.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:					110.00
<input checked="" type="checkbox"/> Large Entity <input type="checkbox"/> Small Entity					
<input type="checkbox"/> No additional fee is required for this amendment.					
<input checked="" type="checkbox"/> Please charge Deposit Account No. <u>18-0013</u> in the amount of \$ <u>110.00</u> . A duplicate copy of this sheet is enclosed.					
<input type="checkbox"/> A check in the amount of \$ _____ to cover the filing fee is enclosed.					
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.					
<input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge and credit Deposit Account No. <u>18-0013</u> as described below. A duplicate copy of this sheet is enclosed.					
<input checked="" type="checkbox"/> Credit any overpayment.					
<input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.					
 Robert S. Green Attorney Reg. No.: 41,800				Dated: <u>May 14, 2003</u>	
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